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Where quality counts: The perceived influence of in-hospital care on family donation decisions

Background: Theoretically, public support for deceased organ donation may be high, yet the availability of organs for transplantation remains a global concern. A key area of organ loss is the rate of family consent to donation. Families are necessary partners in the organ donation process, and their related experiences are known to influence donation decisions.

Aim: This presentation provides insight into the perceived influence of in-hospital care on family donation decision-making. The study findings are derived from a systematic review and thematic synthesis of secondary research involving family members who experienced an approach for organ donation in a hospital setting.

Method: A protocol was developed and registered in an international database of prospective systematic reviews. Studies were identified by searching three electronic databases, Google search engine and by hand-examination of relevant research reports. Study selection was supported by the application of predetermined inclusion/exclusion criteria. Specifically, we sought to include qualitative studies of European, Australasian and North American (Western world) origin, reported in English and published over the past two decades. A date range of 1998-2018 was guided by an early theoretical argument that the rates of organ donation could be increased by enhancing the quality of hospital care (DeJong et al. 1998). A process of thematic synthesis (Thomas and Harden 2008) was used to extract and combine family-reported experiences of care.

Results: Descriptive themes depicting donor and non-donor family narrative accounts of the donation process revealed the significance of the care experience in the organ donation decision. At the analytic stage we aim to generate a comprehensive set of quality care indicators that can be used as a basis for evidence-informed practice development and as an item pool for questionnaire design. Evaluation and measurement present opportunity to elicit the key components of care foremost in improving the rates of family consent to deceased organ donation.

Reference

DeJong W, Franz HG, Wolfe SM et al. (1998) Requesting organ donation: an interview study of donor and non-donor families. *American Journal of Critical Care* 7: 13-23.

Thomas J, Harden A. (2008) Methods for the thematic synthesis of qualitative research in systematic reviews. *BMC Medical Research Methodology* 8: 45. Available at: <http://bmcmedresmethodol.biomedcentral.com/articles/10.1186/1471-2288-8-45>